

# CONFIDENTIAL GRAND JURY CITIZEN COMPLAINT FORM

TO: San Bernardino County Grand Jury  
351 N. Arrowhead Avenue, Room 200  
San Bernardino, CA 92415-0243  
(909) 387-3820

The CONFIDENTIAL Grand Jury citizen complaint form should be prepared and filed with the Grand Jury only after all attempts to resolve the complaint have been exhausted. Ordinarily, the County Grand Jury has no jurisdiction over State or Federal agencies, the courts, judicial officers, or most companies in the private sector.

Date: \_\_\_\_\_

**(Please Print or Type)**

Your Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ City \_\_\_\_\_

Phone Number - Home: \_\_\_\_\_ Work \_\_\_\_\_

**THIS COMPLAINT IS AGAINST** (Official/Department/Agency - Identify Specifically and Fully)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Director of Agency/Department (if applicable) \_\_\_\_\_

**BRIEF SUMMARY OF PROBLEM** – Be precise, providing dates, times and names of individuals involved. Describe specific instances instead of broad statements. Attach any available correspondence or documentation that supports this complaint. (Use extra sheets if necessary.)

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**LIST ALL OFFICIALS, DEPARTMENTS OR AGENCIES YOU HAVE CONTACTED ABOUT THIS PROBLEM** (Please print or type)

Name, Department/Agency/Address	Approximate Date of Contact	Type of Contact: Letter, Phone, In Person

**HOW WOULD YOU LIKE TO SEE THIS MATTER RESOLVED?** (Please print or type)


**(Attach additional sheets if necessary)**

*Every person who makes a report to the Grand Jury that a felony or misdemeanor has been committed, knowing the report to be false, is guilty of a misdemeanor (Penal Code Section 148.5(d)).*

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Signature \_\_\_\_\_  
(SIGNATURE IS REQUIRED)